

George W. Stevens

DVA NKM 7257

**Copies of all medical
documents held by DVA**

Compiled May 19, 2003

NYK2

George W. Stevens. DVA NKM 7257

This binder contains copies of all medical documents held by DVA as at May 19, 2003.

Reading from the front, the four sections are:

1. The period 14/7/2000 to 23/10/2000. Application for pension rate increase. Granted from 40% to 50%.
2. 28/4/1982. Following an Appeal, advice from DVA that incapacity accepted as service related. Pension rate 30%
3. The period 1/8/1980 to 11/6/1981. Initial application which was rejected.
4. The period 24/9/1946 (initial engagement) to 21/4/1961 (resignation effective). Copies of service documents

Not provided by DVA are copies of correspondence 29/9/1996 to 20/11/1996 relating to pension increase rate from 30% to 40%.

Vet in Community Details Report



Australian Government
Department of Veterans' Affairs

NKM07257 , GEORGE W STEVENS , Veteran, ACTIVE FILENO

Accepted

20 APRIL 1982 WITH EFFECT FROM 6 FEBRUARY 1980
Unknown, LUMBAR SPONDYLOSIS, Accepted (VEA)

10/03/2003, BILATERAL SENSORINEURAL HEARING LOSS WITH TINNITUS, Accepted (VEA)

10/03/2003, CATARACTS IN BOTH EYES, Accepted (VEA)

10/03/2003, SOLAR KERATOSES, Accepted (VEA)

Not Accepted

23/07/2008, BILATERAL ANGLE-CLOSURE GLAUCOMA, Rejected (VEA)

1 23/07/2008, GASTRO-OESOPHAGEAL REFLUX DISEASE, Rejected (VEA)

2 23/07/2008, CHRONIC GASTRITIS, Rejected (VEA)

3 23/07/2008, DIVERTICULAR DISEASE OF THE COLON, Rejected (VEA)

4 23/07/2008, ISCHAEMIC HEART DISEASE WITH CONGESTIVE CARDIAC FAILURE, Rejected (VEA)

7 23/07/2008, COLORECTAL ADENOMA WITH IRON DEFICIENCY ANAEMIA, Rejected (VEA)

5 23/07/2008, CONDUCTIVE HEARING LOSS, Rejected (VEA)

MEDICHECK REFERRAL CENTRE

65 bathurst street, sydney, 2000
telephone 61 8805

43 hunter street, parramatta, 2150
telephone 633 3366

22 JAN 1979

DR J N WAKS
109 PITT ST
SYDNEY NSW

MR G W STEVENS
26 BENT ST
GREENWICH NSW

AGE = 49

MEDICHECK VISIT NUMBER = 7901180500

CORONARY RISK ASSESSMENT

THIS PATIENT'S RISK OF DEVELOPING CORONARY ARTERY
DISEASE WITHIN EIGHT YEARS IS 0.8 TIMES THE
AVERAGE FOR HIS AGE AND SEX (PATIENT'S RISK =
6.2 PERCENT, AVERAGE RISK = 8.1 PERCENT).

(ESTIMATES BASED ON DATA DERIVED FROM THE FRAMINGHAM,
U.S.A. STUDY)

THE ABOVE RISKS WERE CALCULATED USING THESE FACTORS -

SYSTOLIC BLOOD PRESSURE
SERUM CHOLESTEROL +
CIGARETTE SMOKING
ECG - L.V. HYPERTROPHY
RAISED BLOOD SUGAR

+ INDICATES FACTOR PRESENT OR VALUE HIGHER THAN
FRAMINGHAM AVERAGES (NOT RELATED TO MEDICHECK RANGES)

OTHER FACTORS NOT USED IN THE CALCULATION WHICH MAY
CONTRIBUTE TO INCREASED RISK ARE OBESITY, TRIGLYCERIDES,
STRESS, HYPOTHYROIDISM, AND FAMILY HISTORY.

A MANAGEMENT PROGRAM TO CORRECT THE ABOVE FACTORS IS
RECOMMENDED. CONTROL WILL REDUCE RISK BUT THE REDUCTION
CANNOT BE PREDICTED ON PRESENT KNOWLEDGE.

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MR G W STEVENS

22 JAN 1979

PAGE 2

SOCIAL HISTORY

THE PATIENT WAS NOT WELL. HE HAS 2 NATURAL CHILDREN. THE YOUNGEST IS OVER 15 YEARS OF AGE. HE LIVES WITH HIS WIFE AND WITH CHILDREN IN A SINGLE FAMILY HOUSE. EDUCATED WITH FURTHER TECHNICAL TRAINING. BORN IN AUSTRALIA. HE IS SATISFIED WITH HIS OCCUPATION. THE PATIENT HAS ORGANISED EXERCISE FOR ABOUT SIX HOURS OR MORE PER WEEK.

FAMILY HISTORY

THE PATIENTS FATHER DIED OF A HEART ATTACK OR CORONARY OCCLUSION. THE PATIENTS MOTHER IS ALIVE AND WELL. THERE IS A FAMILY HISTORY OF CORONARY DISEASE.

DRUG THERAPY AND ALLERGY HISTORY

HE DENIES DRUG ALLERGY OR SENSITIVITY. PREVIOUSLY HAS HAD A COURSE OF 3 INJECTIONS AGAINST TETANUS AND HAS NOT HAD A RECENT BOOSTER. DURING THE PAST YEAR THE PATIENT HAS NOT HAD TREATMENT WITH CORTICOSTEROIDS.

SMOKING HISTORY

THE PATIENT STOPPED SMOKING LONGER THAN 20 YEARS AGO AFTER HAVING SMOKED FOR 5 TO 10 YEARS.

ALCOHOL AND DRUG HISTORY

HE DRINKS ALCOHOL REGULARLY. IN THE PAST YEAR DRANK EVERY DAY OR MOST DAYS AND ON EACH DRINKING DAY USUALLY HAS 2 OR LESS DRINKS. HE DOES NOT CONSIDER HE HAS A DRINKING PROBLEM.

GENERAL HEALTH

THE PATIENT HAS BEEN IN GOOD HEALTH. IN THE PAST YEAR HE HAS BEEN OVER-TIRED. HE HAS FASTED ACCORDING TO THE INSTRUCTIONS BEFORE VISITING MEDICHECK TODAY. SLEEP IS A PROBLEM BECAUSE OF AN INTERRUPTED NIGHT. HE HAS HAD A SERIOUS ROAD ACCIDENT AS A PASSENGER. *NO! I WAS A PASSENGER IN A CAR WHICH HAD A BAD ACCIDENT. I WALKED AWAY WITH NO INJURY AT ALL.*

NERVOUS SYSTEM

HE HAS HEADACHES WHICH ARE NOT CONSIDERED TO BE AN IMPORTANT PROBLEM. HAS HAD DIZZY SPELLS ABOUT ONCE A WEEK. THEY ARE NOT SEVERE. THEY ARE NOT REGARDED AS AN IMPORTANT SYMPTOM BY THE PATIENT. BRIEF EPISODES OF VERTIGO HAVE OCCURRED.

CARDIOVASCULAR AND RESPIRATORY SYSTEMS

THERE HAS BEEN CHEST PAIN IN THE PAST YEAR WHICH IS NOT REGARDED AS IMPORTANT BY THE PATIENT. THE PATIENT HAS HAD ASTHMA. THERE HAS BEEN NO SHORTNESS OF BREATH NOR COUGH.

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22 JAN 1979

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ALIMENTARY SYSTEM AND ABDOMEN

THE PATIENTS APPETITE IS INCREASED.

URINARY SYSTEM

NOCTURIA OCCURS ONCE TO TWICE A NIGHT. HE HAS DIFFICULTY IN INITIATING FLOW DURING MICTURITION.

EYES

HE WEARS GLASSES OR CONTACT LENSES.

MUSCULO SKELETAL SYSTEM

HE HAS PAIN OR STIFFNESS IN MANY JOINTS. THESE SYMPTOMS OCCUR EVERY DAY. CONSIDERS THAT HE HAS DISC DISEASE. HAS A MUSCULO-SKELETAL PROBLEM NOT COVERED IN THE QUESTIONS.

PSYCHOLOGICAL HISTORY

HE RELATES VERY WELL TO OTHERS. IN GENERAL FINDS LIFE TOO DEMANDING. THE PATIENT HAS AN EXCELLENT MARRIAGE. HE HAS EPISODES OF DEPRESSION RARELY. HE HAS HAD PERIODS OF EXCESSIVE ENERGY.

*Back of
distraction
of back*

AUDIOMETRY

| FREQUENCY | LEFT EAR THRESHOLD | RIGHT EAR THRESHOLD |
|-----------|--------------------|---------------------|
| .5 KHZ | 0-10 DB | 20-30 DB |
| 1 KHZ | 0-10 DB | 0-10 DB |
| 2 KHZ | 0 DB | 0-10 DB |
| 4 KHZ | 0 DB | 10-20 DB |
| 8 KHZ | 30-40 DB * | 40-50 DB * |

EYES

TEST NOT DONE - PATIENT WEARS BIFOCALS

TONOMETRY

| EYE | NORMAL RANGE | RESULT |
|-------|--------------|--------|
| RIGHT | 0-25 MMHG | 23 |
| LEFT | 0-25 MMHG | 19 |

FACIO-MAXILLARY X-RAY (INCLUDING MANDIBLE)

NORMAL

ANTHROPOMETRY

| | | |
|---|-------------|-----------|
| HEIGHT | 5 FT 7 INS | 171 CMS |
| WEIGHT | 13 ST 0 LBS | 82.6 KGMS |
| SKIN FOLD THICKNESS (AV. OF 3 READINGS) | | 21 MMS |
| EXPECTED RANGE | 10 - 21 MMS | |

SPIROMETRY

| TEST | PREDICTED VALUE AND RANGE | RESULT |
|--------------|---------------------------|--------|
| FEV(0.5 SEC) | 2.9 (ABOVE 2.3) LITRES | 3.0 |
| FEV(1.0 SEC) | 3.8 (ABOVE 3.2) LITRES | 3.9 |
| FVC | 4.7 (ABOVE 4.0) LITRES | 5.3 |
| FEV(1)/FVC | 81.1 (74.1-88.1) PERCENT | 73.6 * |

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22 JAN 1979

PAGE 4

CHEST X-RAY

ABNORMAL WITH NO SIGNIFICANCE

*

RADIOLOGICAL DIAGNOSIS

THORACIC CAGE

SPONDYLOSIS NOTED

BLOOD PRESSURE

TEST

NORMAL RANGE

RESULT

SYSTOLIC

96-159 MMHG

112

DIASTOLIC

51- 94 MMHG

80

ELECTROCARDIOGRAM ANALYSIS

NORMAL

SINUS RHYTHM RATE 71

BIOCHEMISTRY (13)

TEST

NORMAL RANGE

RESULT

POTASSIUM

3.7- 5.2 MILLIMOL/L

5.1

TOTAL PROTEIN

67- 87 GRAMS/L

81

ALBUMIN

35- 55 GRAMS/L

45

CALCIUM

2.20-2.65 MILLIMOL/L

2.45

URATE

0.15-0.50 MILLIMOL/L

0.41

CREATININE

0.06-0.12 MILLIMOL/L

0.11

GLUCOSE (FASTING)

3.8- 6.6 MILLIMOL/L

6.0

TOTAL BILIRUBIN

2- 22 MICROMOL/L

7

ALK PHOSPHATASE

10- 115 UNITS/L

63

GAMMA GT

4- 48 UNITS/L

21

CHOLESTEROL

3.4- 7.3 MILLIMOL/L

6.8 *

TRIGLYCERIDES

0.20-1.30 MILLIMOL/L

1.02

ETR

0.90-1.10

1.02

(EFFECTIVE THYROXINE RATIO)

HAEMATOLOGY (8)

TEST

NORMAL RANGE

RESULT

W.B.C.

4- 11 THOUSAND/C.M.M.

8.0

R.B.C.

4.5-6.5 MILLION/C.M.M.

5.3

HGB.

14- 18 GRAMS/100ML

15.3

HCT.

40- 54 PERCENT

44.8

M.C.V.

76- 96 CU.MICRO-M.

83.0

M.C.H.

26- 34 PICO-GRAMS

27.8

M.C.H.C.

31- 37 PERCENT

34.7

E.S.R.

1- 10 MM./HOUR

10

(WESTERGREN)

BLOOD FILM

NORMAL

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SEROLOGY (2)

V.D.R.L.

NON-REACTIVE

RHEUMATOID FACTOR

NON-REACTIVE

URINALYSIS

PROTEIN

NOT DETECTED

GLUCOSE

NOT DETECTED

BLOOD

NOT DETECTED

BACTERIAL COUNT

NORMAL (LESS THAN 1,000/ML)

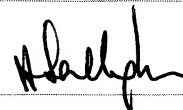
* A RESULT OF POSSIBLE SIGNIFICANCE.

** A RESULT WHICH REQUIRES FOLLOW UP IF NOT PREVIOUSLY KNOWN.

THANK YOU FOR REFERRING THIS PATIENT.

A FULL PHYSICAL EXAMINATION IS NOT DONE AT MEDICHECK, AND THIS REPORT IS OFFERED AS A COMPLEMENT TO YOUR PHYSICAL EXAMINATION AND CLINICAL OPINION.

ENQUIRIES ABOUT ANY OF THE ABOVE TEST RESULTS MAY BE DIRECTED TO THE MEDICAL DIRECTOR ON 61-8805 OR 212-4061.



SERVICE DOCUMENTS MIB



CX

MIX
MIXM 1951

STEVENS
Surname

George Woodfull
Christian Names

A52784



7/1 /1981

DEPARTMENT OF DEFENCE
(NAVY OFFICE)

~~RUSSELL RIFLES~~ Campbell Park 4-
CANBERRA, A.C.T. 2600

Enquiries Ring
CANBERRA 663874

IN REPLY QUOTE: DGNHS/11/8

7 JAN 1981

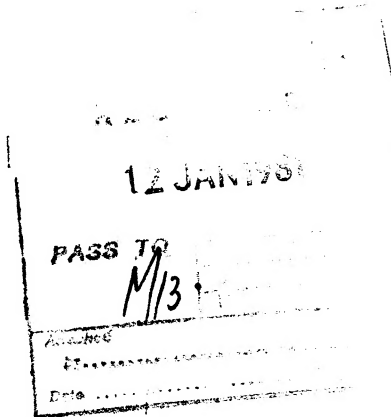
The Deputy Commissioner,
Department of Veterans' Affairs,
GPO Box 3994
SYDNEY NSW 2001

STEVENS George Woodfull

Reference: A. YOUR MKM 7257 M13 LIST 1917
OF 17 OCT 80

Forwarded herewith are the following:

- a. ✓ Medical Documents
- b. Dental Records
- c. X-ray Films.



OB Gear

For (J.M. CURTIN)
Civil Assistant to
Director General of
Naval Health Services

**MEDICAL
IN CONFIDENCE**

3/3/1952

F R Hopkin

March 3 - 1952

Rfe 6/6

L 0/18

R 0.5

R 0.6 or there

Of the for pae in Tern

R 6 + 0.25 lb

TO 25.0 / $\times 100 = 6/5$

6/6 + 1.0 gl from 6/5

Scopas *Hypobothus arcticus* + fog

Glenn under for clear and

for 2522 + from 1/2 way out

1/2 way in

See, by the

5/3/1952

P.M.T. 5/3/52 1670

A.M.—188. (Revised 1948)

Case of a patient (a) discharged to Hospital, (b) requiring out-patient treatment or (c) referred to a Specialist:—

| | |
|---|----------------------------------|
| Name of Ship: H.M.A.S. " <i>Archer</i> " | Place where: <i>Western Port</i> |
| <small>Surname in BLOCK Letters.</small> | <small>Christian Names.</small> |
| Name of patient: <i>STEVENS</i> | <i>George Woodfull</i> |
| Quality: <i>R.E.</i> | Age: <i>23</i> |
| Official Number: <i>(A) 32735</i> | Religion: <i>—</i> |
| Disease or Injury: <i>Hypermetropic Astigmatism & Lazy Left eye</i> | |
| Whether due to road accident: <i>(Describe in Text)</i> | |
| Hurt Certificate and date: <i>—</i> | |
| Whither discharged: <i>Ophthalmic Specialist</i> Date of discharge, <i>/ / 19</i> | |
| Next of kin: <i>—</i> | Present Address: <i>—</i> |

Date, *27* *2* *52* 19

The R.E. eye suitable for vision to R. eye. Vision R.E. P.H. No. visual complaints.
R. eye. Vision R.E. 0.5 J. 0.75 vision
Referred Ophthalmic Specialist: Ophthalmic

Record of Treatment

15/3/1949

(This form is to be used for the information of Medical Officers who may subsequently have to treat the patient, and should be attached to the Medical History Sheet on discharge of the patient from the Sick List.)

Name of—

Naval Hospital
Sick Quarters
H.M. A. Ship
Hospital Ship

FLINDERS.

| Surname (In BLOCK letters) | Christian Names | Age | Quality | Official No. | Date | | Ward | X-Ray Reference No. |
|-------------------------------|----------------------|-----|---------|--------------|----------|------------|------|---------------------|
| | | | | | Admitted | Discharged | | |
| STEVENSON. | George. Woodfull. | 20 | L/REM. | 32734 | 15-3-49 | 22-3. | "F" | |

DATE

CASE RECORD

DIAGNOSIS:

VACCINIA AND T.A.B. REACTION.

T.A.B. reaction.

Chest. N.A.D.

Rx. Mist. A.P.C. 4hly.

19-3-49. Symptomless. Fit to get up.

21-3-49. Satisfactory. Discharge tomorrow.

M. Littlejohn

(Sgd) P.M. LITTLE JOHN.

SURGEON LIEUTENANT. R.A.M.

15/3/1949
A.M.—188. (Revised September, 1934)
(Reprinted—February, 1946)

Case of a patient (a) discharged to Hospital, (b) requiring out-patient treatment,
or (c) referred to a Specialist:—

| | |
|---|--|
| Name of Ship: H.M.A.S. LONSDALE <small>Surname in BLOCK letters.</small> | " Place where: Port Melbourne <small>Christian Names.</small> |
| Name of patient: STEVENS | George Woodfull |
| Quality: L.R.E.M. | Age: 20 |
| Official Number: 32734 | Religion: Church of England. |
| Disease or Injury: T.A.B. Reaction | |
| Hurt Certificate and date: | |
| Whither discharged: Flinders Naval Hospital Date of discharge, 15/3/1949 | |
| Next of kin: Mother Mrs C.W Stevens | Present Address: 88 Eskdale Road, Caulfield S.E.7. |

Date, 15th March 1949. 19

The above named rating was inoculated this morning with
1 c.c. T.A.B. Vaccine and 1 c.c. Cholera V. Vaccine. He was also
Vaccinated on 9th March with Accelerated Result.

P.M. today his temp is 100.6 P.95.

He is forwarded for admission and treatment please.

J.A. McLean
Surgeon Commander RAN
Senior Medical Officer

A. W. 4b
(late A.S. 446.)
(Established August, 1943).

MEDICAL HISTORY SHEET

for Naval Ratings

| | | | |
|-------------------------|-----------------------|--------------------------------|--|
| Surname (Block letters) | | Christian Name or Names | |
| STEVENS. | | George Woodfull | |
| Official No. | BLOOD GROUP. | Rating (to be noted in pencil) | |
| 32734. | Moss International | W.P.M. | |
| Religious Denomn. | | | |
| Church of England | | | |
| Date of birth | When entered | Where entered | |
| 10/2/29 | 24/9/46 | Melbourne. | |
| Place of birth | Age at entry | Previous Occupation | |
| Woolswain (Dad) | 17 7/12 | Mach. | |

RECORD OF DRAFTING MOVEMENTS (other than those caused by illness).

Notation is to be made on transfer from one ship or establishment to another of the Medical Drafting category, indicated as follows:—"A" (fit for general service); "B" (fit for draft to a ship carrying a medical officer); "C" (unfit temporarily); "D" (temporarily unfit for sea service but fit for shore service); "E" (permanently unfit for sea service but fit for shore service); "X" (permanently unfit for sea service or tropical service); "Y" (temporarily unfit for sea service or tropical service); "M" (temporarily unfit for draft to potentially Malarious Area).

[illegible]

This Page is to be used for (A) Periods on the Sick List, (B) Minor Injuries and (C) Specialist treatment only

Name STEVENS (Block letters) Christian Names George Woodfull Rating Off. No. 32724
(to be noted in pencil)

| Ship, &c. | Date of Admission | Date of Discharge | No. of Days Sick | Disease or Injury | Disposal | M.O.'s Initials | General Remarks |
|--|-------------------|-------------------|------------------|---|----------------------------|-----------------|--|
| <u>Compiled from Records held at Navy Office</u> | | | | | | | |
| <u>Watson</u> | <u>7/10/47</u> | <u>7/10/47</u> | <u>-</u> | <u>Rubella</u> | <u>Penguin</u> | | |
| <u>Penguin</u> | <u>7/10/47</u> | <u>7/10/47</u> | <u>-</u> | <u>"</u> | <u>Balmoral Naval Hosp</u> | | |
| <u>Balmoral Naval Hosp</u> | <u>7/10/47</u> | <u>14/10/47</u> | <u>7</u> | <u>"</u> | <u>Duty</u> | | |
| <u>F.N.H.</u> | <u>2/3/52</u> | <u>3/3/52</u> | <u>1</u> | <u>Hypermetropic Astigmatism</u> <u>& large left eye</u> | <u>Duty</u> | <u>CP</u> | <u>27-10-47</u> <u>Glasses ordered for close work</u> |
| <u>J.P.H.</u> | <u>15.3.49</u> | <u>22.3.49</u> | <u>7</u> | <u>Vaccinia</u> | <u>Duty</u> | | |
| <u>Hth & Ctrcl</u> | <u>14.6.49</u> | <u>17.6.49</u> | <u>3</u> | <u>Sprain Rt ankle.</u> | <u>Duty</u> | | <u>OD. OG</u> |
| <u>"</u> | <u>11.1.50</u> | <u>15.1.50</u> | <u>5 A/L</u> | <u>Burn Rt Foot.</u> | <u>Duty</u> | | <u>NOD. OG</u> |
| <u>Albatross</u> | <u>19.6.51</u> | <u>20.6.51</u> | <u>A/L 2</u> | <u>Sprained left hand.</u> | <u>Duty</u> | | <u>off duty.</u> |
| <u>Perberus</u> | <u>27.2.52</u> | <u>28.2.52</u> | <u>1</u> | <u>Hypermetropic astigmatism</u> <u>with large left eye.</u> | <u>Duty</u> | | <u>Visit to eye specialist.</u> |
| <u>Sydney</u> | <u>7.10.53</u> | <u>7.10.53</u> | <u>A/L 1</u> | <u>Sunburn</u> | <u>Duty</u> | | |

(in pencil)

32730

Remarks on Colour Vision:

(i.e., for re-engaging, submarine service, diver, tropical service, Royal Navy, X-ray of chest, etc.)

VACCINATION RECORD.

INOCULATION RECORD.

| Date | Result | M.O.'s Initials | Date | Material | 1st inoc. dose | 2nd inoc. dose and date | M.O.'s Initials | Date | Material | 1st inoc. dose | 2nd inoc. dose and date | M.O.'s Initials |
|---------|-------------|-----------------|---------|----------|----------------|-------------------------|-----------------|------|----------|----------------|-------------------------|-----------------|
| 9/3/49 | Accelerated | JS | 9/3/49 | TAB | 1/2 cc. | 1 cc. | JS | | | | | |
| 12/2/55 | ARV | JS | 12/3/49 | ENV | 1/2 cc. | 1 cc. | JS | | | | | |
| | | | 12/2/53 | | | 1 1/2 | | | | | | |



DEPARTMENT OF DEFENCE
(NAVY OFFICE)

RUSSELL OFFICES
CANBERRA, A.C.T. 2600

IN REPLY QUOTE. N264-28-1070

30 JUL 1980

The Deputy Commissioner
Department of Veterans' Affairs
PO Box 3994
Sydney 2001

George Woodfull Stevens

Reference: Your MKM 7257 M13 List 1917

1. A statement of service number 71180
in respect of George Woodfull Stevens
is forwarded together with a statement of movements of the
relevant ships.

W Patterson
for Director of Naval Officers Postings

M13



DEPARTMENT OF DEFENCE
(NAVY OFFICE)

~~RUSSELL OFFICE~~ Campbell Park 4-7
CANBERRA, A.C.T. 2600

Enquiries Ring
CANBERRA 663874

IN REPLY QUOTE: DGNHS/11/8/1914

25 JUN 1960

The Deputy Commissioner,
Department of Veterans' Affairs,
GPO Box 3994
Sydney 2001

STEVENS, George Woodfull 32734

Reference: A. MKM 7257 M13 1917 of 13.5.80

Forwarded herewith are the following:

- a. Medical Documents ✓
- b. Dental Records
- c. X-ray Films.

W John Robertson
for (J.M. CURTIN)
Civil Assistant to
Director General of
Naval Health Services

RECEIVED
11 JUN 1960

CONFIDENTIAL

No. of enclosure in A.F. Med. 4

A.F. Med. 7
(Introduced 1954.)

OUT-PATIENT RECORD

| | | |
|-----------------------------|---|------------|
| 1. Service No. | 2. Rank/Rating | 3. Surname |
| 4. Christian or Forename(s) | 5. Port Div./Regt. Corps/R.A.A.F. Command | |
| 6. Ship/Unit/R.A.A.F. Unit | 7. Branch/Trade | |

1. Service No. **14**

2. Rank/Rating **SUB LT.(E).**

3. Surname **STEVENS.**

4. Christian or Forename(s) **George Woodful.**

5. Port Div./Regt. Corps/R.A.A.F. Command **33**

6. Ship/Unit/R.A.A.F. Unit **H.M.A.S. "Albatross".**

7. Branch/Trade

Referred to _____ Hospital

for the purpose of Radiologist's Report of Chest X-ray.M.O.'s diagnosis N11280.

Hospital/Specialist diagnosis (if different) _____

| Date | CLINICAL NOTES. (These notes are to be signed by a Medical Officer as a true extract or copy of A.F. Med. 6) |
|------|---|
|------|---|

6/4/61. Routine chest X-ray prior to Termination of Service on 21/4/61.

Radiologist's Report;

Chest appears normal.

A.E.D. 11/4/61.

CERTIFIED TRUE COPY.WARDMASTER LIEUTENANT. RAN.

Special Medical Examination Record

Reason for examination.....
(e.g., Re-engagement, Annual Medical, First Examination for Service Abroad, Diving, Termination of Service, etc.)

Surname..... Christian or fore names.....

Rank/Rating..... Official No..... Date of birth.....

RECORD OF PHYSICAL EXAMINATION.

1. VISION:

(a) Without glasses.

Near R.D. = 0. Distant 6/
L.D. = 0. 6/

(b) With glasses.

Near R.D. = 0. Distant 6/
L.D. = 0. 6/

2. Colour perception: To be tested (after entry)

- (i) For Navigating Officers on specialization.
(ii) Promotion from Rating to Officer.
(iii) In any case of doubt.

(a) Edridge Green Lantern: Grade.....

(b) Ishihara Test.*.....

* Insert "Pass" or "Fail" as appropriate.

3. HEIGHT (with bare feet): 4. WEIGHT (without clothes)

..... feet..... in. stone..... lb.

5. CHEST GIRTH:

Maximum..... in. Minimum..... ins.

6. X-RAY EXAMINATION OF CHEST:

Film No..... Result..... CLEAR

Spool No..... Date.....

7. BLOOD PRESSURE:

Systolic..... 130 mm. Diastolic..... 85 mm.

8. HEARING:

R.E. (W.V.H.)..... 20 feet.

L.E. (W.V.H.)..... 20 feet.

(W.V.H.) = Whispered Voice Heard

9. URINE:

Albumen..... Sugar.....

10.

| P | U | L | H | E | E | M | S | Employment standard |
|---|---|---|---|---|---|---|---|------------------------|
| | | | | / | / | | | |

11. SPECIAL TEST (e.g., Audiometer for T.A.S.):

Nature of Test.....

Remarks.....

Result.....

CLINICAL EVALUATION.

NOTES.

| Normal. | Abnormal | Check each item in appropriate column. | Describe every abnormality in detail, quoting pertinent item number. |
|-------------------------------------|----------|---|--|
| <input checked="" type="checkbox"/> | | 12. Head, face, neck, scalp | |
| <input checked="" type="checkbox"/> | | 13. Nose, sinuses. | |
| <input checked="" type="checkbox"/> | | 14. Mouth, throat. | |
| <input checked="" type="checkbox"/> | | 15. Ears, drums. | |
| <input checked="" type="checkbox"/> | | 16. Eyes, squint, etc. | |
| <input checked="" type="checkbox"/> | | 17. Lungs. | |
| <input checked="" type="checkbox"/> | | 18. Heart (size, rhythm, sounds). | |
| <input checked="" type="checkbox"/> | | 19. Vascular system (varicosities, etc.). | |
| <input checked="" type="checkbox"/> | | 20. Abdomen, viscera (include hernia). | |
| <input checked="" type="checkbox"/> | | 21. Anus, rectum. | |
| <input checked="" type="checkbox"/> | | 22. Genito-urinary system. | |
| <input checked="" type="checkbox"/> | | 23. Endocrine system. | |
| <input checked="" type="checkbox"/> | | 24. Skin, lymphatic system. | |
| <input checked="" type="checkbox"/> | | 25. Physique. | |
| <input checked="" type="checkbox"/> | | 26. Upper extremities (include hands). | |
| <input checked="" type="checkbox"/> | | 27. Lower extremities (include feet). | |
| <input checked="" type="checkbox"/> | | 28. Mental capacity. | |
| <input checked="" type="checkbox"/> | | 29. Emotional stability. | |
| <input checked="" type="checkbox"/> | | 30. Central nervous system. | |
| <input checked="" type="checkbox"/> | | 31. Spinal column. | |
| <input checked="" type="checkbox"/> | | 32. Speech. | |
| <input checked="" type="checkbox"/> | | 33. Dental condition. | |
| <input checked="" type="checkbox"/> | | 34. Gynaecological. | |

35. The member is considered Fit for Active Service in the Rank Branch of the Royal Australian Navy.
 (Insert Re-engagement, General Service, Service Abroad, Discharge, etc.)

H.M.A.S. "A/Hunter"

[Signature]
 (Signature of Medical Officer.)

Date 4/6/61

NOTES—(1) Insert fit or unfit as appropriate.

(2) For discharge also complete form A.M. 146Z.

Rank LT RAN

MEDICAL REPORT ON AN OFFICER OR RATING PREVIOUS TO DISCHARGE FROM THE ROYAL AUSTRALIAN NAVY OR REVERSION TO THE ROYAL NAVY.

(Previous to discharge to shore, every Officer and Man will be required to complete this form)

Ship or depot... HMAS... ALBATROSS.....

Name in full... STEVENS..... George Monaghan.....
(Surname BLOCK letters) (Christian Names)

Rank or Rating... Ensign S/Lt (AR) RM..... Official Number.....
R.A.N. R.A.N.R.(S)

Permanent Address... ONAN STREET.....
R.A.F.R. R.A.N.V.R.
R.A.N.R. R.N.(Pensioner)

..... HUSKISSON 6C NSW.....

First joined Royal Australian Navy (Date) 21/9/1946 and Royal Navy.....
(Date)

- 1.(a) On what stations have you served, LEBBES TOKINS WATSON GLADSTONE
giving names of ships? HARMINI SYDNEY MELBOURNE ALBATROSS RANBORN
(b) Did you serve outside the three mile HMS ARIEL
limit of Australian waters in time of war? YES
(c) If so, give names of ships in which HMAS SYDNEY OCT 53 TO NOV 54
you served, and dates.

2. If you are suffering from any disease, wound or injury, state what it is, the date upon which it stated, and what, in your opinion, was the cause of it.

- 3.(a) Were you granted a Hurt Certificate, or Hurt Certificates for any injury or injuries sustained on duty? NO
(b) If not, was there, to your knowledge or belief, any other record made of the injury? NO
(c) If so, give particulars, date and name of ship in which serving at the time of injury.

4. Give the names of any ships and hospitals in which you have been treated for the above disability or disabilities.

5. Did you suffer from the disease or injury mentioned in the above answer to question two, or anything like it, before joining the navy? If so, give details and dates.

- 6.(a) What was your occupation prior to joining the navy? MENTAL SCIENTIST

- (b) What occupation do you intend to follow on discharge from the navy? COMMONWEALTH PUBLIC SERVANT

The above statement has been read to by me. I fully understand it's contents and have nothing to add to it.

Signature..... [Signature]..... Member.
Signature..... [Signature]..... Witness.
H.M.A.S. [Signature]..... Date..... [Date]

to be filled in only in respect of a disability for which no claim has made, but is discovered by Examining Medical Officer)

What is the degree of disablement at which he should be assessed at present ?

(Degree of disablement should be expressed in words and figures, and in units ranging from 1% to 20% of total disablement)

NA

(b) What, in the opinion of the Medical Officer will the degree of final residual disablement be ?

NA

12. (to be filled in in reference to question two and three.

(a) Is any disability in existence as a result of injury or injuries in respect of which a Hurt Certificate or Hurt Certificates were, or should have been granted, or in respect to which an official record exists.
(Give reference to record)

NA

(b) If so, assess each disability separately and express such assessment in words and figures as in the case of question 11.

NA

Examining Medical Officers.

Signature..... *[Signature]* Rank... *Surg Lt RAN.*

Signature..... Rank.....

H.M.A.S. *[Signature]* Reason for discharge.....
E.G. Demobilisation, P.U.N.S., S.N.L.R. etc.

Date..... *[Signature]* Commanding Officer.....

Note:- This report must be forwarded when completed, to Director of Naval Medical Services, Navy Office, Melbourne, S.C.1. After insertion of the signature of Commanding Officer of the ship or depot in which the examination takes place, together with Medical History Documents of the member.

Sighted..

Medical Director General.

//

Enclosure No. 13

Special Medical Examination Record

Form A.M. 48 (Established 1955).
(Reprinted 1958).

Reason for examination ANNUAL
(e.g., Re-engagement, Annual Medical, First Examination for Service Abroad, Diving, Termination of Service, etc.)
Surname STEVENS Christian or fore names George Woodfull
Rank/Rating S/LIEUT. Official No. R.A.N. Date of birth 10/2/24

RECORD OF PHYSICAL EXAMINATION.

1. VISION:

(a) Without glasses.

Near R.D. = O. Distant 6/ 66
L.D. = O. 5

(b) With glasses.

Near R.D. = O. Distant 6/
L.D. = O. 5

2. Colour perception: To be tested (after entry)

- (i) For Navigating Officers on specialization.
- (ii) Promotion from Rating to Officer.
- (iii) In any case of doubt.

(a) Edridge Green Lantern: Grade.

(b) Ishihara Test.*

* Insert "Pass" or "Fail" as appropriate.

3. HEIGHT (with bare feet): 4. WEIGHT (without clothes)

5'8" feet 8 1/2 stone 8 lb.

5. CHEST GIRTH:

Maximum 40 in. Minimum 38 ins.

6. X-RAY EXAMINATION OF CHEST:

Film No. 237 Result N.A.D.
Spool No. D10 Date 13/1/61

7. BLOOD PRESSURE:

Systolic 130 mm. Diastolic 85 mm.

8. HEARING:

R.E. (W.V.H.) 20' feet.

L.E. (W.V.H.) 70' feet.

(W.V.H.) = Whispered Voice Heard

9. URINE:

Albumen Nil Sugar Nil

10.

| | | | | | | | | |
|---|---|---|---|---|---|---|---|------------------------|
| P | U | L | H | E | E | M | S | Employment standard |
| | | | | / | / | | | |

11. SPECIAL TEST (e.g., Audiometer for T.A.S.):

Nature of Test

Remarks

Result

CLINICAL EVALUATION.

NOTES.

Normal. Abnormal

Check each item in appropriate column.

Describe every abnormality in detail, quoting pertinent item number.

| | | |
|---|--|---|
| N | | 12. Head, face, neck, scalp |
| N | | 13. Nose, sinuses. |
| N | | 14. Mouth, throat. |
| N | | 15. Ears, drums. |
| N | | 16. Eyes, squint, etc. |
| N | | 17. Lungs. |
| N | | 18. Heart (size, rhythm, sounds). |
| N | | 19. Vascular system (varicosities, etc.). |
| N | | 20. Abdomen, viscera (include hernia). |
| N | | 21. Anus, rectum. |
| N | | 22. Genito-urinary system. |
| N | | 23. Endocrine system. |
| N | | 24. Skin, lymphatic system. |
| N | | 25. Physique. |
| N | | 26. Upper extremities (include hands). |
| N | | 27. Lower extremities (include feet). |
| N | | 28. Mental capacity. |
| N | | 29. Emotional stability. |
| N | | 30. Central nervous system. |
| N | | 31. Spinal column. |
| N | | 32. Speech. |
| N | | 33. Dental condition. |
| N | | 34. Gynaecological. |

NAVY MEDICAL AND DENTAL EXAMINATION OFFICERS

.....
Medical Director General

35. The member is considered fit for Active Service in the Branch of the Royal Australian Navy.
(Insert Re-engagement, General Service, Service Abroad, Discharge, etc.)

H.M.A.S. AlbatrossDate 27/12/1961

NOTES—(1) *Insert fit or unfit as appropriate.

(2) For discharge also complete form A.M. 146Z.

(Signature of Medical Officer.)

Rank 101

30,000—18156—1/58

Enclosure No. 12

Special Medical Examination Record

Form A.M. 48 (Established 1955).
(Reprinted 1938).

Reason for examination ANNUAL
(e.g., Re-engagement, Annual Medical, First Examination for Service Abroad, Diving, Termination of Service, etc.)

Surname STEVENS Christian or fore names George Adolf

Rank/Rating 71 (A) Official No. 1217 Date of birth 10.12.29

RECORD OF PHYSICAL EXAMINATION.

1. VISION:

(a) Without glasses.

Near R.D. = 0.5 Distant 6/5
L.D. = 0.5 6/5

(b) With glasses.

Near R.D. = 0. Distant 6/
L.D. = 0. 6/

2. Colour perception: To be tested (after entry)

- (i) For Navigating Officers on specialization.
- (ii) Promotion from Rating to Officer.
- (iii) In any case of doubt.

(a) Edridge Green Lantern: Grade.

(b) Ishihara Test.*

* Insert "Pass" or "Fail" as appropriate.

3. HEIGHT (with bare feet): 4. WEIGHT (without clothes)

feet 7 1/2 in. 13 stone - lb.

5. CHEST GIRTH:

Maximum 41 in. Minimum 38 ins.

6. X-RAY EXAMINATION OF CHEST:

Film No. 56 Result NAD
Spool No. D5 Date 25.1.60.

7. BLOOD PRESSURE:

Systolic 120 mm. Diastolic 70 mm.

8. HEARING:

R.E. (W.V.H.) 20 feet.

L.E. (W.V.H.) 20 feet.

(W.V.H.) = Whispered Voice Heard

9. URINE:

Albumen Nil Sugar Nil

10.

| P | U | L | H | E | E | M | S | Employment standard |
|---|---|---|---|---|---|---|---|------------------------|
| | | | | / | / | | | |

11. SPECIAL TEST (e.g., Audiometer for T.A.S.):

Nature of Test

Remarks

Result

CLINICAL EVALUATION.

NOTES.

| Normal. | Abnormal | Check each item in appropriate column. | Describe every abnormality in detail, quoting pertinent item number. |
|-------------------------------------|--------------------------|---|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 12. Head, face, neck, scalp | ANNUAL MEDICAL AND DENTAL EXAMINATION OFFICERS |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 13. Nose, sinuses. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 14. Mouth, throat. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 15. Ears, drums. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 16. Eyes, squint, etc. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 17. Lungs. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 18. Heart (size, rhythm, sounds). | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 19. Vascular system (varicosities, etc.). | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 20. Abdomen, viscera (include hernia). | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 21. Anus, rectum. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 22. Genito-urinary system. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 23. Endocrine system. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 24. Skin, lymphatic system. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 25. Physique. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 26. Upper extremities (include hands). | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 27. Lower extremities (include feet). | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 28. Mental capacity. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 29. Emotional stability. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 30. Central nervous system. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 31. Spinal column. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 32. Speech. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 33. Dental condition. | |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 34. Gynaecological. | |

[Signature]
Medical Director General

20 MAR 1960

35. The member is considered * *fit* for *Annual* in the *Medical* Branch of the Royal Australian Navy.

H.M.A.S. "*Albatross*" (Insert Re-engagement, General Service, Service Abroad, Discharge, etc.)

Date *8 2 60* / 19 *60*

NOTES—(1) *Insert fit or unfit as appropriate.

(2) For discharge also complete form A.M. 146Z.

[Signature]
(Signature of Medical Officer.)

Rank *Major*

CONFIDENTIAL

No. of enclosure in A.F. Med. 4 11

A.F. Med. 7

(Introduced 1954.)

OUT-PATIENT RECORD

| | | |
|---|-------------------------------------|---|
| 1. Service No. <u>R.N.</u> | 2. Rank/Rating <u>S/LT. (L).</u> | 3. Surname <u>STEVENS</u> |
| 4. Christian or Fore Name(s) <u>George Woodfull</u> | | 5. Port Div./Regt. Corps/R.A.A.F. Command <u>Sydney.</u> |
| 6. Ship/Unit/R.A.A.F. Unit <u>H.M.A.S. ALBATROSS</u> | | 7. branch/Trade <u>ELECTRICAL.</u> |

Referred to SCHOOL OF AIR MEDICINE. Hospitalfor the purpose of AUDIOGRAM.M.O.'s diagnosis ROUTINE,

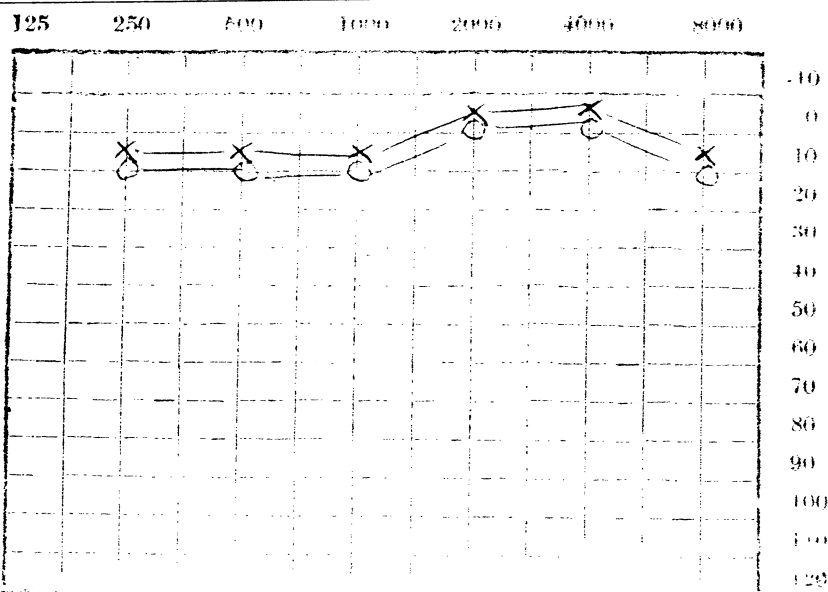
Hospital/Specialist diagnosis (if different) _____

Date

CLINICAL NOTES.

(These notes are to be signed by a Medical Officer as a true extract or copy of A.F. Med. 6)

14.12.1959.



FREQUENCY IN CYCLES PER SECOND

Air Left X Right O Bone Conduction

Average Hearing Loss (decibels) Left _____ Right _____

Binocular Percentage loss _____

Case's Name _____

Tester _____ Audiometer AMPLIVOX,

Special Medical Examination Record

Form A.M. 48 (Established 1955).
(Reprinted 1958).

Reason for examination

(e.g., Re-engagement, Annual Medical, First Examination for Service Abroad, Diving, Termination of Service, etc.)
ANNUAL MEDICAL

Surname

STEVENS.

Christian or fore names

George Woodfull

Rank/Rating

SUB LIEUT.

Official No.

R.M.N.

Date of birth

10/2/29.

RECORD OF PHYSICAL EXAMINATION.

1. VISION:

(a) Without glasses.

Near R.D. = 0.5 Distant 6/6
L.D. = 0.5 6/6

(b) With glasses.

Near R.D. = 0. Distant 6/
L.D. = 0. 6/

2. Colour perception: To be tested (after entry)

- (i) For Navigating Officers on specialization.
- (ii) Promotion from Rating to Officer.
- (iii) In any case of doubt.

(a) Edridge Green Lantern: Grade.

(b) Ishihara Test. * Pass

* Insert "Pass" or "Fail" as appropriate.

3. HEIGHT (with bare feet): 4. WEIGHT (without clothes)

5 feet 8 in. 12 stone 10 1/2 lb

5. CHEST GIRTH:

Maximum 40 in. Minimum 36 ins.

6. X-RAY EXAMINATION OF CHEST:

Film No. 70167 Result PASSSpool No. Date 16-3-59

7. BLOOD PRESSURE:

Systolic 120 mm. Diastolic 85 mm.

8. HEARING:

R.E. (W.V.H.) Not attemptedL.E. (W.V.H.) Not attempted

(W.V.H.) = Whispered Voice Heard

9. URINE:

Albumen NilSugar Nil

10.

| P | U | L | H | E | E | M | S | Employment standard |
|---|---|---|---|---|---|---|---|------------------------|
| | | | | / | / | | | |

11. SPECIAL TEST (e.g., Audiometer for T.A.S.):

Nature of Test

Remarks

Result

| CLINICAL EVALUATION. | | NOTES. |
|----------------------|----------|---|
| Normal. | Abnormal | |
| | | Check each item in appropriate column. Describe every abnormality in detail, quoting pertinent item number. |
| N | | 12. Head, face, neck, scalp |
| N | | 13. Nose, sinuses. |
| N | | 14. Mouth, throat. |
| N | | 15. Ears, drums. |
| N | | 16. Eyes, squint, etc. |
| N | | 17. Lungs. |
| N | | 18. Heart (size, rhythm, sounds). |
| N | | 19. Vascular system (varicosities, etc.). |
| N | | 20. Abdomen, viscera (include hernia). |
| N | | 21. Anus, rectum. |
| N | | 22. Genito-urinary system. |
| N | | 23. Endocrine system. |
| N | | 24. Skin, lymphatic system. |
| N | | 25. Physique. |
| N | | 26. Upper extremities (include hands). |
| N | | 27. Lower extremities (include feet). |
| N | | 28. Mental capacity. |
| N | | 29. Emotional stability. |
| N | | 30. Central nervous system. |
| N | | 31. Spinal column. |
| N | | 32. Speech. |
| N | | 33. Dental condition. |
| NA | | 34. Gynaecological. |

ANNUAL MEDICAL AND DENTAL EXAMINATION OFFICERS

Medical Director General

35. The member is considered *fit* for *General Service* in the *Engineering* Branch of the Royal Australian Navy.
 H.M.A.S. " *Belbourn* " (Insert Re-engagement, General Service, Service Abroad, Discharge, etc.)

Date *13/5/59* /19

NOTES.—(1) *Insert fit or unfit as appropriate.

(2) For discharge also complete form A.M. 146Z.

(Signature of Medical Officer.)

Rank

Surgeon Commander, RAN

CONFIDENTIAL

No. of enclosure in A.F. Med. 4

8

A.F. Med. 14
(Introduced, 1954)

IN-PATIENT RECORD

| | | | | |
|---|-----------------------------------|--|--|---|
| 1. Service No. RAN | 2. Rank/Rating S.1A | 3. Surname. STEVENS | | |
| 4. Christian or Fore Name(s) George W. | | 5. Port Div/Regt Corps/ RAAF Command | 6. Ship/Unit/RAAF Unit Albatross | |
| 7. Branch/Trade (RAAF only) | 8. Age last birthday 29 | 9. Total full-time service yrs. mths. | 10. Married/Single married | |
| 11. Type of enlistment/commission | | 12. Theatre in which admitted Fleet or Station (Navy) | | 13. Length of service in theatre at date of admission yrs. mths. |
| 14. Name of medical unit in which treated | | Date of admission/ transfer IN | Date of discharge/ transfer OUT | No. of days |
| Direct admission to:— Sick Quarters, Albatross | | 23.1 | 1959 4.2 | 11 |
| Arrived, as a transfer, in:— | | | | |
| Arrived, as a transfer, in:— | | | | |
| Arrived, as a transfer, in:— | | | | |
| Arrived, as a transfer, in:— | | | | |
| 15. Final disposal (If died state cause of death and whether confirmed by P.M.) | | | | 11 Total No. of days under treatment |

Duty (Sick Leave 4 days)

| | |
|---|---|
| 16. Firm diagnosis of principal disease or injury leading to admission. Dorsal 7 root pain. | |
| 17. Principal complication or sequel of 16. | 18. Secondary disease(s) or injury(ies) aetiologically unconnected with 16. |
| 19. Nature of any surgical operation | 20. Special information in accordance with current instructions |

INJURY AND WOUNDED CASES ONLY

| | | |
|--------------------------------------|---|---|
| 21. Enemy action or non-enemy action | 22. Date of hurt certificate (Navy) AM183 (Army) AAFD4 (RAAF) PM27. | 23. Nature of weapon or cause of injury |
| 24. Activity at time of injury | | |

(These notes are to be signed by a Medical Officer as a true extract or copy of F. Med. 10/11 and, where applicable, of A.F. Med. 26/27)

Summary.

History of 4 days increasing pain below left shoulder blade radiating to the right hypochondrium. Increased by any active movement, especially bending forward.

O.E. Back - No tenderness.

Limitating of left lateral flexion and rotation to the left and very marked loss of antifixion no unilateral muscle spasm. Hyperaesthesia in 7th and 8th rib spaces and upper epigastrium.

Abdo - guarding in upper epigastrium, no tenderness or nausea.

Chest - NAD.

Responded well to rest in bed, discharged to sick leave.

(sgd) J.F.Killick.
Surgeon Lieutenant R.A.N.



CERTIFIED TRUE COPY.
WARDMASTER SUB. LT. RAM.

CONFIDENTIAL

No. of enclosure in A.F. Med. 4

M.R. 10

A.F. Med. 7
(Introduced 1954.)

OUT-PATIENT RECORD

| | | |
|---|-----------------------|---|
| 1. Service No. R.A.N. | 2. Rank/Rate S/Lt. | 3. Surname STEVENS. |
| 4. Christian or Fore Name(s) George. Wood full. 29 | | 5. Port Div./Regt. Corps/R.A.A.F. Command |
| 6. Ship/Unit/R.A.A.F. Unit Albatross. | | 7. branch/Trade |

Referred to Balmoral Naval Hospital
for the purpose of Chest X-Rayreport A.P. CHEST. Rt Ant Obl.
T 7/8.
M.O.'s diagnosis _____
Hospital/Specialist diagnosis (if different) _____

Date

CLINICAL NOTES.

(These notes are to be signed by a Medical Officer as a true extract or copy of A.F. Med. 6)

23/1/59.

② 7th Dorsal root pain.

Film No. N8796.

Sgd. J. KILLICK.
Surg. Lt. R.A.N.No significant abnormality detected in the P.A
and oblique view.

A.E.D. 12/2/59.

Certified true copy.

Wardmaster Sub. Lt. .R.A. N

Special Medical Examination Record

Annual Medical

Reason for examination _____
(e.g., Re-engagement, Annual Medical, First Examination for Service Abroad, Diving, Termination of Service, etc.)

Surname

STEVENS

Christian or fore names

George Woodfull

Rank/Rating

Sec. L.H. (S)

Official No.

RAN

Date of birth

16/1/29.

RECORD OF PHYSICAL EXAMINATION.

1. VISION:

(a) Without glasses.

Near R.D. = 0.5 Distant 6/6

L.D. = 0.5 6/6

(b) With glasses.

Near R.D. = 0. Distant 6/

L.D. = 0. 6/

2. COLOUR PERCEPTION:

(a) Edridge Green Lantern: Grade _____

(b) Ishihara Test: *Pass.
*Fail.

*Cross out where not applicable.

3. WEIGHT (without clothes):

12 stone 7 lb.

4. HEIGHT (with bare feet):

5 feet 8 in.

5. CHEST GIRTH:

Maximum 40 in. Minimum 38 ins.

6. X-RAY EXAMINATION OF CHEST:

Film No. 62

Result

Normal

Spool No. C3

Date 11-12-55.

7. BLOOD PRESSURE:

Systolic 115 mm. Diastolic 70 mm.

8. HEARING:

R.E. (W.V.H.) 20 feet.

L.E. (W.V.H.) 20 feet.

9. URINE:

Albumen Nil

Sugar NIL

10.

| P | U | L | H | E | E | M | S | Employment standard |
|---|---|---|---|---|---|---|---|------------------------|
| | | | | / | / | | | |

11. SPECIAL TEST (e.g., Audiometer for T.A.S.):

Nature of Test _____

Remarks _____

Result _____

CLINICAL EVALUATION.

NOTES.

Describe every abnormality in detail, quoting pertinent item number.

Normal.

Abnormal.

Check each item in appropriate column.

12. Head, face, neck, scalp.

13. Nose, sinuses.

14. Mouth, throat.

15. Ears, drums.

16. Eyes, squint, etc.

17. Lungs.

18. Heart (size, rhythm, sounds).

19. Vascular system (varicosities, etc.).

20. Abdomen, viscera (include hernia).

21. Anus, rectum.

22. Genito-urinary system.

23. Endocrine system.

24. Skin, lymphatic system.

25. Physique.

26. Upper extremities (include hands).

27. Lower extremities (include feet).

28. Mental capacity.

29. Emotional stability.

30. Central nervous system.

31. Spinal column.

32. Speech.

33. Dental condition.

34. Gynaecological.

35. The member is considered unfit for

H.M.A.S. "ALBATROSS"

Date

NOTES.—(1) *Cross out where not applicable.
(2) For discharge also complete form A.M. 146Z.

ANNUAL MEDICAL AND DENTAL
EXAMINATION, OFFICERS 58

Medical Director General

in the Royal Australian Navy.

(Signature of Medical Officer.)

Rank

40,000—\$1502/5/55—63922 St 3233—1 A. H. PETTIFER, GOVERNMENT

CONFIDENTIAL

No. of enclosure in A.F. Med. 4

6

MR. 1/31/57

T.A.

M.B. 1/8

A.F. Med. 14
(Introduced, 1954)

IN-PATIENT RECORD

| | | | | | |
|---|--|---|---------------------------------------|-------------------|---|
| 1. Service No. R.A.N. | 2. Rank/Rating Elec Sub/lt (SI) | 3. Surname. STEVENS | | | |
| 4. Christian or Fore Name(s) George Woodful | 5. Port Div/Regt Corps/ RAAF Command Sydney | 6. Ship/Unit/RAAF Unit H.M.A.S. ALBATROSS | | | |
| 7. Branch/Trade (RAAF only) George | 8. Age last birthday 23 | 9. Total full-time service yrs. 10 mths. | | | |
| 11. Type of enlistment/commission | 12. Theatre in which admitted Fleet or Station (Navy) | 10. Married/single Married | | | |
| | | 13. Length of service in theatre at date of admission yrs. mths. | | | |
| 14. Name of medical unit in which treated | | | | | |
| Direct admission to:— | | Date of admission/ transfer IN | Date of discharge/ transfer OUT | No. of days | Serial No. |
| Arrived, as a transfer, in:— Sick on Shore | | 8-7-57 | 9-7-57 | 1 | |
| Arrived, as a transfer, in:— Sick on Shore | | 12-7-57 | 14-7-57 | 2 | |
| Arrived, as a transfer, in:— | | | | | |
| Arrived, as a transfer, in:— | | | | | |
| 15. Final disposal (If died state cause of death and whether confirmed by P.M.) | | | | | Total No. of days under treatment 3 |

Duty.

16. Firm diagnosis of principal disease or injury leading to admission.

Influenza

| | |
|---|--|
| 17. Principal complication or sequel of 16. | 18. Secondary disease(s) or injury(ies) aetiologically unconnected with 16. |
| 19. Nature of any surgical operation | 20. Special information in accordance with current instructions |

INJURY AND WOUNDED CASES ONLY

| | | |
|--------------------------------------|--|---|
| 21. Enemy action or non-enemy action | 22. Date of hurt certificate (Navy) AM183 (Army) AAFD4 (RAAF) PM27. | 23. Nature of weapon or cause of injury |
| 24. Activity at time of injury | | |

Date

CLINICAL NOTES.

(These notes are to be signed by a Medical Officer as a true extract or copy of F. Med. 10/11 and, where applicable, of A.F. Med. 26/27)

Officer was Sick on Shore from 8-7-57 to 9-7-57 and again from 12-7-57 to 14-7-57. suffering from influenza. Was not seen by a Medical Officer

Medical Officers report after returning from S.O.S.

This Officer reported that he was Sick on Shore on 8-7-57 with Influenza and again on 12-7-57. He was not seen by a Medical Officer during this time.

P.H. Brett.
Surg Lt Cdr RAN

[Signature]
Certified True Copy.

CLINICAL EVALUATION.

Normal.

Abnormal.

Check each item in appropriate column.

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

NAD

12. Head, face, neck, scalp.

13. Nose, sinuses.

14. Mouth, throat.

15. Ears, drums.

16. Eyes, squint, etc.

17. Lungs.

18. Heart (size, rhythm, sounds).

19. Vascular system (varicosities, etc.).

20. Abdomen, viscera (include hernia).

21. Anus, rectum.

22. Genito-urinary system.

23. Endocrine system.

24. Skin, lymphatic system.

25. Physique.

26. Upper extremities (include hands).

27. Lower extremities (include feet).

28. Mental capacity.

29. Emotional stability.

30. Central nervous system.

31. Spinal column.

32. Speech.

33. Dental condition.

34. Gynaecological.

NOTES.

Describe every abnormality in detail, quoting pertinent item number.

24. Scar lower right chest

ANNUAL MEDICAL AND DENTAL
EXAMINATION, OFFICERS35. The member is considered * ~~unfit~~ fit for

H.M.A.S. "all others"

Date 7/3/1957

NOTES.—(1) *Cross out where not applicable.
(2) For discharge also complete form A.M. 146Z.

General Service Category A

(Insert Re-engagement, General Service, Service Abroad, Discharge, etc.)

in the Royal Australian Navy.

Medical Director General

(Signature of Medical Officer.)

Rank Surgeon

40,000—S1502/5/55—63922 St 5233—1 A. H. PETTIFER, GOVERNMENT PRINTER.

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No. of enclosure in A.F. Med. 4 3A.F. Med. 7
(Introduced 1954.)

OUT-PATIENT RECORD

| | | |
|--|-----------------------------------|---|
| 1. Service No. 3214. | 2. Rank/Rating F.O.R.E. | 3. Surname Stevens. |
| 4. Christian or True Name(s) George Woodfull. | | 5. Port Div./Regt. Corps/R.A.A.F. Command |
| 6. Ship/Unit/R.A.A.F. Unit H.M.A.S. Albatross. | | 7. Branch/Trade |

Referred to _____ Hospital
 for the purpose of _____
 M.O.'s diagnosis _____
 Hospital/Specialist diagnosis (if different) _____

| Date | CLINICAL NOTES. (These notes are to be signed by a Medical Officer as a true extract or copy of A.F. Med. 6) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------|---|-----------|------------|----------|-----|------------|----------|-----|------------|-----------|-----|------------|-----------|-----|------------|-----------|-----|------------|-----------|-----|------------|-----------|-----|------------|-----------|-----|------------|-----------|
| 16/11/55. | <p>is This rating was referred by Dr. Gillespie of Nowra. N.S.W. Dr. Gillespie advised that he had:- Seminal Volume 2cc. Sperms 5,600,000 per c.c. 95% Non Motile. 5% Motile. He was given a course of antuitian 'S' as follows:- 500 units 3 times a day week for six weeks. Course began 5/10/55. ended 13/11/55. K. Armsrong. <u>Surg. Cdr. R.A.N.</u> Dr. A.L. Carrodus Urologist gives this advise Antuitian 'S' 500 units 3 times a week for 6 weeks.</p> <table border="0"> <tr> <td>Dose 1</td> <td>500 units.</td> <td>5/10/55.</td> </tr> <tr> <td>" 2</td> <td>500 units.</td> <td>7/10/55.</td> </tr> <tr> <td>" 3</td> <td>500 units.</td> <td>10/10/55.</td> </tr> <tr> <td>" 4</td> <td>500 units.</td> <td>12/10/55.</td> </tr> <tr> <td>" 5</td> <td>500 units.</td> <td>14/10/55.</td> </tr> <tr> <td>" 6</td> <td>500 units.</td> <td>17/10/55.</td> </tr> <tr> <td>" 7</td> <td>500 units.</td> <td>19/10/55.</td> </tr> <tr> <td>" 8</td> <td>500 units.</td> <td>21/10/55.</td> </tr> <tr> <td>" 9</td> <td>500 units.</td> <td>25/10/55.</td> </tr> </table> | Dose 1 | 500 units. | 5/10/55. | " 2 | 500 units. | 7/10/55. | " 3 | 500 units. | 10/10/55. | " 4 | 500 units. | 12/10/55. | " 5 | 500 units. | 14/10/55. | " 6 | 500 units. | 17/10/55. | " 7 | 500 units. | 19/10/55. | " 8 | 500 units. | 21/10/55. | " 9 | 500 units. | 25/10/55. |
| Dose 1 | 500 units. | 5/10/55. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| " 2 | 500 units. | 7/10/55. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| " 3 | 500 units. | 10/10/55. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| " 4 | 500 units. | 12/10/55. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| " 5 | 500 units. | 14/10/55. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| " 6 | 500 units. | 17/10/55. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| " 7 | 500 units. | 19/10/55. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| " 8 | 500 units. | 21/10/55. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| " 9 | 500 units. | 25/10/55. | | | | | | | | | | | | | | | | | | | | | | | | | | |

Cont. Over

Date

CLINICAL NOTES

| | | | |
|------|-----|------------|-----------|
| Dose | 10. | 500 units. | 26/10/55. |
| " | 11. | 500 units. | 28/10/55. |
| " | 12. | 500 units. | 31/10/55. |
| " | 13/ | 500 units. | 2/11/55. |
| " | 14. | 500 units. | 4/11/55. |
| " | 15. | 500 units. | 7/11/55. |
| " | 16. | 500 units. | 9/11/55. |
| " | 17. | 500 units. | 11/11/55. |
| " | 18. | 500 units. | 13/11/55. |

Course completed.

K⁶

W. Armstrong
Armstrong.

Surg. Cdr. R.A.N.

Copy.

at the time of making his attestation
this _____ day of _____
19____ before me

AUSTRALIAN

DEFENCE FORCES

Introduced Nov., 1951.
Reprinted 1953.

Record of Medical Examination of Recruit

Attesting Officer. _____
Surname (in capitals) STEVE NS. Other Names George Woodfull.
Age 26 years "11" months. Date of Birth 20.2.29
Occupation P.O.R.E. Service RAN } Cross out where not applicable
Complexion Dark Colour of Hair Brown Colour of Eyes Green

TABLE I

NOTE: EACH QUESTION IS TO BE PUT TO THE RECRUIT BY THE EXAMINING MEDICAL OFFICER WHO IS TO SATISFY HIMSELF THAT EACH QUESTION IS UNDERSTOOD. THE RECRUIT MUST FILL IN THIS TABLE IN HIS OWN HAND. WRITING. ALL QUESTIONS MUST BE ANSWERED.

1. Are you suffering from any disease or disability?
2. Have you ever suffered from any of the following illnesses? If so, give particulars, date, etc.
 - (a) Rheumatism, rheumatic fever, or pains in the joints
 - (b) Heart Disease
 - (c) Shortness of Breath
 - (d) Tuberculosis or Consumption
 - (e) Spitting of Blood
 - (f) Pleurisy
 - (g) Asthma or Hay Fever
 - (h) Sinus trouble
 - (i) Neurasthenia or Nervous Breakdown
 - (j) Sleepwalking
 - (k) Meningitis, Infantile Paralysis or any other Paralysis
 - (l) Migraine
 - (m) Kidney or Bladder Disease
 - (n) Bedwetting or inability to hold urine
 - (o) Skin Disease
 - (p) Malaria
 - (q) Dysentery
 - (r) Ulcer of Stomach or Indigestion
 - (s) Diabetes
 - (t) Piles
 - (u) Venereal Disease
 - (v) Stricture
 - (w) Have you had any other illness or disease?
3. Have you had fits or fainting attacks of any kind?
4. Have you suffered from deafness or had discharge from either ear?
5. Have you had any eye trouble? Have you ever worn glasses?
6. Have you had a broken bone or been seriously injured—including head injury? If so, state nature and date.
7. Have you ever been operated upon? If so, state nature and date.
8. Has any member of your family suffered from—(a) Tuberculosis; (b) Nervous breakdown; (c) Mental trouble; (d) Hereditary disease? If so, give particulars (relationship and when)—
 - (a) _____
 - (b) _____
 - (c) _____
 - (d) _____
9. Have you ever been rejected or deferred for Life Assurance?
10. Have you ever served in a Branch of Her Majesty's Forces? If so, give particulars.
11. Have you been rejected or discharged as unfit for service in any branch of Her Majesty's Forces? If so, give date and reason.
12. Have you been wounded or suffered any illness on Active Service? If so, give particulars.
13. Are you in receipt of any pension for a previous disability?

Incapacity during menstrual periods— (For Female Candidates only.)

Nil }
Mild } _____ days.
Severe }

I hereby declare that I have carefully considered the statements made above, which have been explained to me by the Examining Medical Officer, that to my belief they are correct and that I have not withheld any relevant information or made any misleading statement. I am fully aware that by suppressing any information or making any false representations in respect of any disease or disability, either disclosed or not in the statements made above I shall incur the risk of not being accepted for service in the Defence Forces of the Commonwealth, or, if accepted, summarily dismissed and forfeiting any claim to pay, deferred pay, pension or any other benefit or advantage of the Service. I am prepared to undergo during my service all medical examinations, vaccinations, inoculations and any dental treatment as may be required of me.

_____/_____/19____

Signature of Recruit

Signature of Witness

TABLE II—REPORT OF X-RAY EXAMINATION OF CHEST.

| of X-Ray | Film Serial No. | Film Spool No. | Result of X-Ray Examination |
|----------|-----------------|----------------|-----------------------------|
| 0-55. | A33. | 50 | normal |

TABLE III—DENTAL EXAMINATION

- he recruit sufficient sound teeth for mastication? Yes
has the recruit jaws which lend themselves to the fitting of effective dentures? _____
recruit rejected for dental reasons? No

OF 9 2 101 WITHOUT GLASSES.
1. Near R.D. = o. Distant 6/ 4.5
L.D. = o. Distant 6/ 4.5

WITH GLASSES.
Near R.D. = o. Distant 6/
L.D. = o. Distant 6/

2. Colour Vision Perception.

(a) Edridge Green Lantern: Grade.

(b) Ishihara Test: * Pass/Fail.

* Cross out where not applicable.

3. Weight: Without clothes 12 stone 7 lbs.

4. Height: With bare feet 5 ft. 8 ins.

Chest girth:

Maximum 39 ins. Minimum 37 ins.

5. Waist measurement at level of umbilicus with abdomen relaxed 34 ins.

6. Limbs and Joints (including hands, feet and back).

7. General Development

8. Skin:

9. Marks, Scars and Deformities:

10. Nervous system:

11. Abdomen.

Hernia, etc.:

12. Lungs (X-Ray—See Table II):

13. Heart, etc.:

14. Blood Pressure:

Systolic.

Diastolic.

15. Ears

Hearing:

RE (WVH)

LE (WVH)

16. Speech:

17. Mouth and Naso-Pharynx:

18. Genital Organs:

19. Anus—Piles, etc.:

20. Urine: Alb.

Sugar

NOTE 1: Only the weight, height, chest, waist measurements and urine tests above may be made by members other than a Medical Officer. ALL OTHER EXAMINATIONS must be carried out by an Examining Medical Officer and are not to be deputed to any person other than a Medical Officer.

TABLE V—(Entered by the Examining Medical Officer)
PARTICULARS OF ANY DISABILITY INSUFFICIENT TO CAUSE REJECTION

- (a) Nature of disability/ies (1) (2) (3)
- (b) Restrictions caused thereby (in non-technical terms)
- (c) Is the disability permanent? If permanent, will it increase? Will it decrease? Has it reached a stationary condition?
- (d) If not permanent, (1) What is the probable duration? (2) Is a further medical examination required? (3) When?
- (e) Has the recruit been advised to consult a doctor?
- (f) What is the present extent of incapacity in the general labour market from each disability?
(1) per cent. (2) per cent. (3) per cent.

TABLE VI—CERTIFICATE OF EXAMINING MEDICAL OFFICER(S)

The candidate is considered Class

for service in the

Branch of the RAN, the AMF or

mustering of the RAAF.

I/We certify that I/we have fully explained Table I to the candidate and have personally carried out all medical examinations as required by Note 1 to Table IV above.

I/We also certify that I/we have perused all the Medical Documents available.

Date 3/1/1956

Place HMAS Albatross

Examining Medical Officer(s).

TABLE VII—CERTIFICATE OF REJECTION

I/We have rejected this candidate for the following medical reasons:

Date / /19

Place

MEDICAL CENSUS RECORD

| | | | |
|---------------------------------|-------------------------|--|-------------------------------------|
| Official Number 5734 | Rank/Rating 1/1st Lt | Christian or Fore Names George Woodfull | Surname (BLOCK CAPITALS) STEVENS |
| Ship or Establishment Sydney | Date of Birth 2-29 | Previous Occupation MN | Religious Denomination C of E |
| Date of Entry 24-9-46 | Weight on Entry — | Date(s) of Re-Entry or Re-Engagement — | M.O.S Initials and Date — |

SPECIAL EXAMINATIONS

| Date | Examined for | Result | Date | Examined for | Result | Date | Examined for |
|------|--------------|--------|------|--------------|--------|------|--------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

SICKNESS EXTRACT (where there is more than one entry for a single illness, show only Final Diagnosis and total of Days Sick)

| Ship | Date of Onset | Number of Days Sick | Final Diagnosis | Where Treated | Remarks |
|-------------|---------------|---------------------|---------------------------|---------------|----------|
| Watson | 7.10.47 | 7 | Rubella | BWH | |
| Albatross | 6.11.50 | 3 | Sinusitis | | |
| Centaurus | 3.3.52 | 1 | Hypermetropic Astigmatism | | |
| Centaurus | 15.3.49 | 4 | Vaccinia | FCH. | |
| Feb 6 chiel | 14.6.49 | 3 | Sprain Rt ankle. | | on duty |
| " | 11.1.50 | 5 A/L | Burn Rt Foot. | | off duty |

Continued

[illegible][illegible]

F. W. Thompson

March 3 - 1952

fe 6/6 L 0113
20.5 20.6 c. 0.1

of the Pacific in Texas

20 + 0.25 16
FO 25 of 16 = 6/5

49 + 1.0 97 720 6/5

Diagnosis: Hyperbolic in Texas & Fogg

Leptog.

Stomach contents for close work.

Don H. M. 2502 & M. H. M. 2502

11/20/52

Long City

Case of a patient (a) discharged to Hospital, (b) requiring out-patient treatment, or (c) referred to a Specialist:—

| | |
|---|---------------------------|
| Name of Ship: H.M.A.S. " <i>Archer</i> " Place where: <i>Norfolk Port</i> | |
| <small>Surname in BLOCK Letters.</small> | |
| Name of patient: <i>STEVENS</i> | <i>George Woodfull</i> |
| <small>Christian Names.</small> | |
| Quality: <i>R.E.</i> | Age: <i>23</i> |
| Official Number: <i>(A) 32754</i> | Religion: <i>—</i> |
| Disease or Injury: <i>Hypermetropic Astigmatism & lazy left eye</i> | |
| Whether due to road accident: <i>—</i> (Describe in Text) | |
| Hurt Certificate and date: <i>—</i> | |
| Whither discharged: <i>Ophthalmic Specialist</i> Date of discharge, <i>/ /</i> 19 | |
| Next of kin: <i>—</i> | Present Address: <i>—</i> |

Date, *27* *2* *52* 19

This R.E. eye unable to focus & l. eye. Present for P.H. No manual complaints.

Rx. 6/6 & L. 6/18.

R. 0.5 L. 0.75

Wound Ophthalmic Specialist please see & advise.

Case of a patient (a) discharged to Hospital, (b) requiring out-patient treatment, or (c) referred to a Specialist:—

Name of Ship: H.M.A.S. LONSDALE

Place where: Port Melbourne

Surname in BLOCK letters.

Christian Names.

Name of patient: STEVENS

George Woodfull

Quality: L.R.E.M.

Age: 20

Official Number: 32734

Religion: Church of England.

Disease or Injury: T.A.B. Reaction

Hurt Certificate and date:

Whither discharged: Flinders Naval Hospital Date of discharge: 15/3/1949

Next of kin: Mother

Mrs C.W. Stevens

Present Address: 88 Eskdale Road,

Caulfield S.E.7.

Date, 15th. March 1949. 19

The above named rating was inoculated this morning with
1 c.c. T.A.B. Vaccine and 1 c.c. Cholera V. Vaccine. He was also
Vaccinated on 9th March with Accelerated Result.

P.M. today his temp is 100.6 P. 96.

He is forwarded for admission and treatment please.

J.A. McLean
Surgeon Commandant RAN
Senior Medical Officer

RECORD OF ILLNESS

This form is to be used for the information of Medical Officers who may subsequently have to treat the patient, and should be attached to the Medical History Sheet on discharge of the patient from the Sick List.)

Name of—

Naval Hospital
~~SEACOM~~
~~FLINDERS~~
~~FLINDERS~~

FLINDERS.

| Surname (In BLOCK letters) | Christian Names | Age | Quality | Official No. | Date | | Ward | X-Ray Reference No. |
|-------------------------------|----------------------|-----|---------|-----------------|----------|------------|------|---------------------------|
| | | | | | Admitted | Discharged | | |
| STEVENS. | George. Woodfull. | 20 | L/REM. | 32734 | 15-3-49 | 22-3. | "J" | |

DATE

CASE RECORD

DIAGNOSIS:

VACCINIA AND T.A.B. REACTION.

T.A.B. reaction.

Chest. N.A.D.

Rx. Mist. A.P.C. 4hrly.

-3-49. Symptomless. Fit to get up.

-3-49. Satisfactory. Discharge tomorrow.

pm Littlejohn

(Sgd) P.M. LITTLEJOHN.

SURGEON LIEUTENANT. R.A.N.

52734

Remarks on Colour Vision:

(i.e. for re-engaging, submarine service, diver, tropical service, Royal Navy, X-ray of chest, etc.)

VACCINATION RECORD.

| Date | Material | 1st inoc. dose | 2nd inoc. dose, and date | M.O.'s Initials | Date | Material | 1st inoc. dose | 2nd inoc. dose and date | M.O.'s Initials |
|---------|----------|----------------|--------------------------|-----------------|------|----------|----------------|-------------------------|-----------------|
| 9/3/49 | TAB | 1/2 CC | 15.3.49 1 CC | JS | | | | | |
| 9/3/49 | ENV | 1/2 CC | 15/3/49 1 CC | JS | | | | | |
| 12/2/53 | CVU | 1/2 CC | 19/2/53 1 CC | JD | | | | | |
| 12/2/51 | TAB | 1/2 CC | 5/3/53 1 CC | JD | | | | | |

This Page is to be used for (A) Periods on the Sick List, (B) Minor Injuries and (C) Specialist treatment only

urname STEVENS (Block letters) Christian Names Georg Woodfree Rating 2/10/47 Off. No. 3273
(to be noted in pencil)

| Ship, etc. | Date of Admission | Date of Discharge | No. of Days Sick | Disease or Injury | Disposal | M.O.'s Initials | General Remarks |
|-------------------------------|-------------------|-------------------|------------------|--------------------------------------|-------------------------------|-----------------|-----------------|
| <i>Completed from</i> | | | | | | | |
| <i>Watson</i> | 7/10/47 | 7/10/47 | — | <i>Rusella</i> | <i>Penguin</i> | | |
| <i>Penguin</i> | 7/10/47 | 7/10/48 | — | " | <i>Salmonella Nares Virus</i> | | |
| <i>Salmonella Nares Virus</i> | 7/10/47 | 14/10/47 | 7 | " | <i>Anty</i> | | |
| <i>Albany</i> | 6/1/50 | 9/1/50 | 3 | <i>Ammonia</i> | <i>Duty</i> | | |
| <i>F.N.H.</i> | 3/3/52 | 3/3/52 | 1 | <i>Hypertensive Arteriosclerosis</i> | <i>Duty</i> | | |
| <i>Completed from</i> | | | | | | | |
| <i>S.P.H.</i> | 15.3.49 | 12.3.49 | 7 | <i>Sacchara</i> | <i>Duty</i> | | |
| <i>W.B. & C. H.</i> | 14.6.49 | 17.6.49 | 3 | <i>Sprain Rt ankle</i> | <i>Duty</i> | | |
| | 11.1.50 | 15.1.50 | 5 | <i>Burn Rt foot</i> | <i>Duty</i> | | |
| <i>McBarnes</i> | 19.6.51 | 20.6.51 | 2 | <i>Sprained left hand</i> | <i>Duty</i> | | |
| <i>McBarnes</i> | 27.2.52 | 28.2.52 | 1 | <i>Hypertensive Arteriosclerosis</i> | <i>Duty</i> | | |
| | | | | <i>with large left eye</i> | | | |
| <i>Sedgewick</i> | 7.10.53 | 7.10.53 | 1 | <i>Syphilis</i> | <i>Duty</i> | | |

OD. OG
NOD. OG
off duty
Wait to Eye Specialist

27-10-47

CG

11/

Spines ordered for disc wear

MEDICAL HISTORY SHEET

for Naval Ratings

Surname (Block letters)

STEVENS

Christian Name or Names

George Woodfull

Official No.

32734

BLOOD GROUP

Moss
International

Rating (to be noted in pencil)

1/RM

Religious Denomn.

Church of England

Date of birth

10/2/29

When entered

24/9/46

Where entered

Melbourne

Place of birth

Wooloowin (Qld)

Age at entry

17 1/2

Previous Occupation

M.N.

RECORD OF DRAFTING MOVEMENTS (other than those caused by illness).

Notation is to be made on transfer from one ship or establishment to another of the Medical drafting category, indicated as follows:—"A" (fit for general service); "B" (fit for draft to a ship carrying a medical officer); "C" (unfit temporarily); "D" (temporarily unfit for sea service but fit for shore service); "E" (permanently unfit for sea service but fit for shore service); "X" (permanently unfit for sea service or tropical service); "Y" (temporarily unfit for sea service or tropical service); "M" (temporarily unfit for draft to potentially Malarious Area).

| Date | From | To | Drafting Category | M.O.'s Initials | Date | From | To | Drafting Category | M.O.'s Initials |
|----------|----------|-------------|-------------------|-----------------|------|------|----|-------------------|-----------------|
| 24.9.46 | Shore | Cerberus | | | | | | | |
| 29.11.46 | Cerberus | Torrens | | | | | | | |
| 18.7.47 | Torrens | Lonsdale | | | | | | | |
| 4.8.47 | Lonsdale | Watson | | | | | | | |
| 29.10.47 | Watson | Harman | | | | | | | |
| 21.9.48 | Harman | Gladesville | | | | | | | |
| | Lonsdale | London | | | | | | | |
| 22.8.50 | Lonsdale | Abbots | | | | | | | |
| 18.12.51 | Abbots | Cerberus | | | | | | | |

Serial No

Repatriation Ref No

Navy Correspondence

Statement of Service of—

MKN 7251

M13
LIST A17

Personal No

1264 / 28 / 1070

Surname

Given or Christian Names

Rank

Electrical
sub lieutenant
RAN

STEVENS

George Woodfull

Punishments

Korea/Special Overseas Service

KOREA: HMAS SYDNEY 27-10-53 to
2-6-54

Engagements: Appointment:—

Entered RAN 24-9-46

Resigned 21-4-61

Period

From

To

Rank

Ship or Depot

| | | | | |
|----------|----------|---------------|----------------|-------|
| 24-9-46 | 27-11-46 | ORD SMN II | HMAS CERBERUS | DEPOT |
| 28-11-46 | 17-7-47 | RM | HMAS TORRENS | DEPOT |
| 18-7-47 | 24-9-48 | LOG RM (W/T) | HMAS WATSON | DEPOT |
| 25-9-48 | 3-3-49 | LOG REM (W/T) | HMAS GLADSTONE | SHIP |
| 4-3-49 | 6-5-49 | | HMAS LONSDALE | DEPOT |
| 7-5-49 | 16-5-49 | | LONDON DEPOT | DEPOT |
| 17-5-49 | 28-6-50 | A/RE | HMS ARIEL | DEPOT |
| 29-6-50 | 22-8-50 | | HMAS LONSDALE | DEPOT |
| 23-8-50 | 19-12-51 | A/RE (A) | HMAS ALBATROSS | DEPOT |
| 20-12-51 | 17-9-52 | RE (L) | HMAS CERBERUS | DEPOT |

HE CONTINUED TO SERVE UNTIL HIS RESIGNATION ON 21-4-61
HE WAS PROMOTED TO OFFICER ON 4-6-56

Alf Petersen

For Director of Naval Officers Postings

DVA Ref. MKM 7257 M13 LIST 1917

Defence Ref. N 264/28/1070

SHIPS' MOVEMENTS AND RELEVANT DEPOTS *

| Surname | Given Names | Rank | Personal No |
|---------|-----------------|------------|-------------|
| STEVENS | GEORGE WOODFULL | ELECT SBLT | — |

ote. The following abbreviations are used where applicable:

| | | |
|-------------------------|---|--------------------------------|
| AO - Atlantic Ocean | NC - New Caledonia | Sing - Singapore |
| AW - Australian waters | NEI - Netherlands East Indies (where not shown more specifically) | Sols - Solomon Islands |
| Bor - Borneo | | Tim - Timor |
| HK - Hong Kong | | UK - United Kingdom |
| IO - Indian Ocean | | USA - United States of America |
| Mal - Malaya/Malaysia | NG - New Guinea | |
| Med - Mediterranean Sea | NH - New Hebrides | |
| Mor - Morotai | NZ - New Zealand | |

ie, all depots except those in non-tropical areas of Australia

| Period | Ship, Depot, etc (Show ships' names and names of depots commissioned as 'HMAS' in capitals) | Locations | Tropical Service | | |
|-------------------|--|--------------------------------|------------------|------|-----|
| | | | All | Part | Nil |
| 5/9/48 - 3/3/49 | GLADSTONE | AW | | | ✓ |
| 7/4/49 - 16/5/49 | London Depot | UK | | | ✓ |
| 17/5/49 - 28/6/50 | ARIEL | UK | | | ✓ |
| | | John A. MacLennan for CEDHS | | | |